

HEZ State Stat Metrics for West Baltimore							
		Oct - Dec 2013	Jan - Mar 2014	April - June 2014	July - September 2014	October - December 2014	January - March 2015
Goal: Increase or Maintain Service Capacity		Year 1 Quarter 3 (cumulative total)	Year 1 Quarter 4 (cumulative total)	Year 2 Quarter 1 (cumulative total)	Year 2 Quarter 2 (cumulative total)	Year 2 Quarter 3 (cumulative total)	Year 2 Quarter 4 (cumulative total)
Number of Jobs (in FTE) Added ¹	Zone reports/Quarterly /90 day lag						
Number of Licensed Independent Practitioners ² Added		8 FTE	9 FTE	9 FTE	13 FTE	13 FTE	13 FTE
Number of Other Licensed or Certified Health Care Practitioners ² Added		4 FTE	4 FTE	3 FTE	3 FTE	3 FTE	3 FTE
Number of Qualified Employees (CHWs and Interpreters) Added		11.5 FTE	11.5 FTE	11.5 FTE	11.5 FTE	11.5 FTE	11.5 FTE
Number of Other Support Staff Added		5.5 FTE	5.5 FTE	5.5 FTE	5.5 FTE	5.5 FTE	5.5 FTE
Total		26.0 FTE	30.0 FTE	29.0 FTE	33.0 FTE	33.0 FTE	33.0 FTE
1Added = new or retained position							
Goal: Reach Patients with Services		Year 1 Quarter 3 (not cumulative)	Year 1 Quarter 4 (not cumulative)	Year 2 Quarter 1 (not cumulative)	Year 2 Quarter 2 (not cumulative total)	Year 2 Quarter 3 (not cumulative total)	Year 2 Quarter 4 (not cumulative total)
Number of HEZ (unduplicated) patients seen by clinic/practice	Zone reports/Quarterly /90 day lag						
UMMC University Care Edmondson Village		1,833	2,951	1,254	1,343	1,241	1,397
Bon Secours Family Health and Wellness Center		62	242	329	377	335	413
Baltimore Medical System at St. Agnes		615	1,066	916	833	826	777
St. Agnes Outpatient Clinic		n/a	n/a	n/a	n/a	3,219	3,260
Total Health Care		1,405	14,266	5,106	4,783	4,657	4,892
Park West		25	120	116	115	133	121
Total Number of Patient Visits throughout HEZ		8,275	25,514	12,975	12,102	16,450	21,136
Total Number of Unduplicated Patients throughout HEZ		4,010	18,706	7,721	7,451	10,411	10,860
Number of individuals who connect with CHW		2,157	240	539	478	1,198	2,344
Number of individuals who connect with CHW							
Educational/wellness/self-management interventions							
Number of participants in Stanford Disease Management Program	Zone reports/Quarterly /90 day lag						
Number of participants in WB CARE Fitness Program		84	0	0	0	0	0
Number of participants in WB CARE Healthy Cooking Program		88	319	189	281	221	289
Number of participants in WB CARE Healthy Cooking Program		21	40	84	24	54	19
		CY 2012		CY 2013		CY 2014	
GOAL: Health Improvement	CRISP and VDU/Annually/90 day lag	West Baltimore	Maryland	West Baltimore	Maryland	West Baltimore	Maryland
HSCRC hospital admissions per 1,000 residents ³		222.0	110.1	206.2	105	N/A	N/A
HSCRC hospital readmissions rate ³		19.25%	14.21%	18.88%	13.85%	18.05%	13.42%
		CY 2011		CY 2012		CY 2013	
Prevention Quality Indicators (PQI)⁴		West Baltimore	Maryland	West Baltimore	Maryland	West Baltimore	Maryland
PQI, Chronic Composite		1,955.5	1,000.7	1,919.1	899.3	1,797.7	896.4

Program Milestones	Zone reports/Quarterly /90 day lag		Status				
Recruit 8 Primary Care Providers to the Zone			Completed				
Recruit and hire 5 Community Health Workers			Completed				
Develop and implement Care Coordination Program			Completed				
Develop and implement Chronic Disease Management classes			Completed				
Initiate health education and fitness classes			Completed				
Create healthy food options in the community			Completed				
Award scholarships to Zone residents who pursue primary care professional degree/certificate			Completed				
Provide cultural competency training to collaborative partners			Completed				
Purchase access to training re PCMH approach for primary care professionals and paraprofessionals			Completed				
3HSCRC Hospital Data includes Maryland residents hospitalized in Maryland only							
2HEZ Practitioners: Includes Licensed Independent Practitioners (physician, dentist, nurse practitioner, physician assistant, nurse midwife) and Other Licensed or Certified Health Care Practitioner (RN, social worker, certified medical assistant, licensed practical nurse, dental hygienist, certified addictions counselor) who provide primary care, dental or behavioral health services in the Zone. These practitioners are hired or retained to newly provide services in the Zone due to the Zone Initiative and may or may not receive HEZ funding.							
4PQIs: The Agency for Healthcare Research and Quality's (AHRQ)'s Prevention Quality Indicators (PQI) chronic composite includes hospitalizations, ages 18 and older, for one of the following conditions: diabetes with short-term complications, diabetes with long-term complications, uncontrolled diabetes without complications, diabetes with lower-extremity amputation, chronic obstructive pulmonary disease, asthma, hypertension, heart failure, or angina without a cardiac procedure.							